



TALBOT COUNTY PLANNING & ZONING

REQUIREMENTS OF AN APPLICATION FOR BED AND BREAKFAST USE CERTIFICATE

(In accordance with and under the authority of Talbot County Code, §190-30)

TO THE APPLICANT: FOR NEW BED AND BREAKFASTS: In order for this application to be processed, ALL of the following documentation must accompany this application. Any application submitted without all of the required documentation will be returned as incomplete.

PROCEDURE FOR APPLICATIONS

NEW USE CERTIFICATE:

- _____ Application and Fee, \$75.00
- _____ A scaled site plan of the property which includes:
 - 1. Property lines
 - 2. All structures
 - 3. Driveways and walks
 - 4. Parking area for guests
 - 5. Well and septic
- _____ A scaled floor plan of the residence to be used for the Bed and Breakfast Operation

RENEW USE CERTIFICATE:

Any change to renewal requires new use certificate and requirements above.

- _____ Application and Fee, \$75.00
- _____ Certification from Applicant that no changes have been made to operation
- _____ Proof of Compliance with Talbot County Accommodations Tax



TALBOT COUNTY PLANNING & ZONING

APPLICATION FOR BED AND BREAKFAST USE CERTIFICATE

(In accordance with and under the authority of Talbot County Code, §190-30)

BED AND BREAKFAST NAME: _____

ADDRESS OF BED AND BREAKFAST: _____

TAX MAP: _____ **GRID:** _____ **PARCEL:** _____ **LOT No :** _____ **ZONE:** _____

TAX IDENTIFICATION NUMBER: _____

DRIVING DIRECTIONS:

NAME, ADDRESS, TELEPHONE (HOME & WORK) OF PERSON SUBMITTING THIS APPLICATION:

Name

Address

Phone h)

w)

EMAIL _____

LIST ALL NAMES, ADDRESS, TELEPHONE (HOME & WORK) OF ALL HOLDERS OF RECORD TITLE

Name

Address

Phone h)

w)

1. _____

2. _____

3. _____

NO. OF BEDROOMS IN RESIDENCE: _____ **NO. OF GUEST ROOMS TO BE UTILIZED:** _____

TOTAL GROSS FLOOR AREA OF STRUCTURE: _____

TOTAL GROSS FLOOR AREA OF GUEST ROOMS: _____

TYPE SEWAGE DISPOSAL: PUBLIC _____ INDIVIDUAL ON-SITE _____

CERTIFICATION: *I certify that all the information noted herein and in any attached documents is true and correct. I understand that in accordance with §190-30, Talbot County Code, the Planning Officer may decline to issue or may suspend or revoke a Bed and Breakfast Use Certificate due to any false, inaccurate, or misrepresentation in this application or other registration. By the filing of this application, I authorize agents of the regulatory governmental agencies to enter onto my property for the purposes of performing the inspections necessary to insure compliance with all regulations, restrictions and limitations on the establishment and operation of a short-term rental property.*

OWNERS SIGNATURE _____ **DATE** _____

OWNERS SIGNATURE _____ **DATE** _____

OWNERS SIGNATURE _____ **DATE** _____

OFFICE USE ONLY _____

APPROVALS:

ZONING INSPECTOR _____ **DATE** _____

PLANNING OFFICE _____ **DATE** _____

HEALTH DEPT _____ **DATE** _____

COMMENTS / CONDITIONS: _____

